

**DATE:** December 11, 2003

**TO:** County Emergency Management Directors

**FROM:** Jerry Haberl, State Training Supervisor

**SUBJECT: Course Recruitment: EVACUATION PLANNING - (G616)**

Wisconsin Emergency Management will sponsor the Federal Emergency Management Agency **Evacuation Planning Course (G616)** beginning **March 1-2, 2004** at the **Wisconsin Military Academy, Fort McCoy, Wisconsin**. The course will begin at **8:00 a.m.** on Monday, March 1<sup>st</sup>, and conclude at approximately **12:00 Noon** on Tuesday, March 2, 2004. Dress is casual.

The purpose of the Evacuation Planning Course is to provide emergency managers and responders with a working knowledge of evacuation needs. The course outlines key points to be considered when planning for an evacuation in your community.

We are requesting that you recruit attendees from within your emergency management community who would benefit from this training. Recruitment could include yourself, Department of Public Works or Highway Department supervisors, representatives from law enforcement, Red Cross, elected and appointed officials, emergency medical service, hospitals, nursing homes, and fire service. Since class size is limited to 36, registration will be on a first-come, first-served basis.

If people travel more than 50 miles one way, and do not wish to commute, **we will make reservations for participants** at the Wisconsin Military Academy. Wisconsin Emergency Management will pay for lodging if traveling more than 50 miles one way; however, expenses for travel, meals, and any other costs associated with your stay are a local responsibility. Additional information will be provided in a letter of confirmation that will be sent when the course roster is finalized.

Please have prospective participants complete the attached registration form, and return the form to your Regional Office no later than **FEBRUARY 2, 2004**.

Thank you for helping us to bring emergency management training to your community. If you have questions or need further information, please call your Regional Director, or the State Training Supervisor at (608) 242-3213.

Encl: Registration Form

cc: WEM Management Staff  
Regional Offices  
Peter Jensen  
Hazardous Materials Response Teams  
Financial Specialist

X:\haberj\haberj\G615 Evacuation Planning\RECRUITMENT LTR & REGISTRATION

REGISTRATION INFORMATION

**EVACUATION PLANNING - (G616)**

**MARCH 1-2, 2004**

**Fort McCoy, Wisconsin**

*Please complete the information below and send it to your County Director by February 1, 2004. County Directors must submit this registration to their Region Office no later than February 2, 2004. Due to the demand for emergency management training, we recommend that you submit your applications as soon as possible.  
(Reproduce this sheet locally for additional people.)*

*(print clearly)*

NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

TITLE \_\_\_\_\_ AGENCY \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_  
(MUST BE PROVIDED TO REGISTER)

HOME ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTY \_\_\_\_\_

WORK PHONE: \_\_\_\_\_ FAX #: \_\_\_\_\_ E-MAIL \_\_\_\_\_

*State Privacy Provision*

*Authorization: Wisc Stats 166.03 and E.O. 9397.*

*Disclosure: Disclosure of personal information is voluntary; however, nondisclosure may result in delay in processing your application. Secondary Purpose: In accordance with Wisconsin Privacy Provision 15.04(m) Wisc Stats, the personal information you provide may be used for purposes other than for which it was collected.*

**LODGING INFORMATION**

\_\_\_\_\_ I live within 50 Miles, and **do not need a room.**

\_\_\_\_\_ I will attend and live over 50 miles away; **reserve a room for me as indicated below:**

**PLEASE CIRCLE THE NIGHT(S) THAT YOU NEED A ROOM**

**SUNDAY, FEBRUARY 29, 2004**

**MONDAY, MARCH 1, 2004**

**Do you require any special accommodations for a physical disability?**

**SIGNATURE OF COUNTY EM DIRECTOR/DATE:** \_\_\_\_\_

**SIGNATURE OF REGIONAL DIRECTOR/DATE:** \_\_\_\_\_

